

MINUTES  
CERTIFIED NURSE MIDWIFE BOARD  
OCTOBER 3, 2006  
ROOM 464 HEBER M WELLS BLDG  
160 E 300 S  
SALT LAKE CITY UTAH

CONDUCTING: Leissa Roberts

CONVENED: 9:07 a.m.

ADJOURNED: 10:16 a.m.

MEMBERS PRESENT: Diane Heubusch  
Linda Cornaby  
Debra Penny  
Leissa Roberts  
Deborah Flansburg

DIVISION STAFF: Laura Poe, Executive Administrator  
Shirlene Kimball, Secretary

**TOPIC OF DISCUSSION:**

**DECISIONS/RECOMMENDATIONS:**

MAY 3, 2006 MINUTES:

Approved as written.

ENVIRONMENTAL SCAN:

Ms. Poe reported that the APRN Roundtable and the APN Consensus Group have been discussing the regulation of APRNs. Ms. Poe indicated that of the eight recommendations from the NCSBN Roundtable, four were agreed on by both groups. There are three recommendations that have the greatest dissention among the APRN groups and Ms. Poe reported that NCSBN will not move forward with the APRN Vision Statement at this time. She indicated that the APN Consensus Group is working on a paper of their own and it is hoped there will be two papers that will be complimentary to each other.

Board members discussed the doctorate of nursing practice degree. Board members questioned whether or not the Division is considering moving to the doctorate of nursing practice degree as an entry level degree? Ms. Poe indicated that the Division is not considering the DNP for entry level at

this point. Ms. Poe reported that the University of Utah will be offering the DNP degree and BYU is looking at incorporating the DNP degree in the future. It was reported that by 2015 the only degree that will be recognized by CCNE for accreditation purposes will be the DNP. Ms. Poe reported most Boards would accept the DNP degree as meeting APRN licensure requirements, but none are mandating the degree for APRN licensure at this time.

PROPOSED LEGISLATION FOR 2007  
AND DISCUSSION REGARDING  
IMPLEMENTATION OF THE APRN  
COMPACT FOR CNMS:

Ms. Poe indicated that in order to be accepted into the APRN Compact, a master's degree in nursing is required. Ms. Poe indicated if the master's degree is added as the requirement for CNM licensure, those individuals who are currently licensed and practicing would continue to practice unless he/she were to let the license lapse or the license were revoked. Those individuals without a master's degree would be issued a valid in Utah only license.

Ms. Roberts questioned whether or not the CNM Act would need to be opened? Ms. Poe indicated the Act would be opened to add the master's degree requirement. It was noted that in 2010 the master's degree will be required for national certification.

Ms. Poe handed out a draft of the proposed changes. The changes would require that an applicant have received a master's degree from an ACNM program, starting in 2010. Graduates from certificate programs would no longer be eligible for licensure in Utah after that date.

Ms. Roberts indicated there are some nurse midwifery programs that accept individuals with a master's degree (such as in biology) who then completes an intensive nursing program and enters the CNM program, but have never received an RN license. Ms.

Poe reported that under current law these individuals would not be eligible for licensure because the Statute requires that an individual be eligible for the RN license. Board members questioned whether or not this is an area that will need to be addressed? Ms. Poe indicated we may need to change the definition of practice and eliminate the RN requirement. If we do this, then if the CNM wants to work as an RN, that individual would have to have dual licensure. Board members indicated more and more of these types of programs will offer the CNM without RN licensure. Board members indicated this should be placed on a future agenda for discussion. Ms. Poe indicated that if we take out the RN, CNMs would not qualify for the APRN Compact. If the Board is going to consider this option, then we do not need to discuss becoming part of the APRN Compact. Ms. Roberts questioned whether or not there could be two tracks to licensure? Ms. Poe indicated there would be two different scopes of practice. Ms. Roberts stated she feels it would be the same scope of practice. Ms. Poe indicated there would be two levels, one would be a certified midwife, the other certified nurse midwife and there would have to be two separate licenses.

Ms. Roberts questioned whether or not moving into the APRN Compact would add confusion and take away the CNM identity. Ms. Poe indicated that 58-31d-103 is the APRN Compact enabling language for the purpose of the compact only. There should be no confusion recognizing both acts. Ms. Heubusch stated this is a big commitment and feels it is important to discuss the issue with other nurse midwives. Ms. Poe indicated she would be willing to discuss these issues at the next CNM association meeting. Ms. Poe stated that if we adopt the requirement now, then it will give those individuals who will be entering the program

enough time to know what will be accepted. Ms. Roberts stated that the professional organization is moving toward the master's degree, there is no reason why we should not put it in our Statute. Ms. Flansburg made a Motion to approve the language and concept to move forward in 2007 with the caveat that the implementation date for certification of a master's degree is 2010. Ms. Heubusch seconded the Motion. All Board members in favor.

DISCUSSION:

Ms. Flansburg questioned whether or not the Board needs to follow through with the survey? Ms. Poe indicated the only follow up maybe to consider adding first assisting to the CNM scope of practice. Ms. Roberts indicated most hospitals will allow a CNM to first assist if the individual has the additional training, either on the job or from class work, and she stated she does not feel it is necessary to add this to the Rules because the individual can be credentialed to first assist.

LICENSED DIRECT ENTRY MIDWIFE  
RULES:

Ms. Poe reported that that LDEM Rules went into effect September 14, 2006. She reported three Rules Hearings were held and the LDEM's had placed more procedures and conditions into the transfer bucket than originally proposed. Ms. Poe indicated most of the CNM issues were addressed. However, the physicians would have liked the client to see a physician first, which would have gone beyond the intent of the law. Ms. Roberts indicated that at this point, these rules only apply to those who chose to be licensed. Those who are not licensed are not subject to the rules. Ms. Poe stated that the non-licensed individual can not use oxygen or pitocin. If the non-licensed individual uses these, a complaint should be filed. Ms. Poe reported there are currently 12 licensed LDEMs.

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NEXT MEETING:

The next meeting will be scheduled for January 24, 2007. Ms. Roberts indicated that the items that need to be placed on the backburner for follow up discussion will be the DNP, first assist and midwifery programs without the RN degree.

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LEISSA ROBERTS, CHAIR

January 24, 2007  
DATE

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LAURA POE, EXECUTIVE  
ADMINISTRATOR

January 24, 2007  
DATE